COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF INDUSTRIAL ACCIDENTS

REVIEW CRITERIA EFFECTIVE JULY 1, 1993

CRITERIA NUMBER 17 - LATERAL LIGAMENT ANKLE RECONSTRUCTION FOR CHRONIC INSTABILITY OF ANKLE

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A. Lateral Ligament Ankle Reconstruction

II. <u>History/Symptoms</u>:

- **A.** Must meet the following:
 - **1.** Instability of the ankle
 - a. Buckling; or
 - **b.** Giving away

OR

- **2.** Supportive Findings:
 - a. Complaint of swelling; or
 - **b.** Complaint of pain

AND

III. Physical Findings:

- **A.** Must meet the following:
 - 1. Positive anterior drawer

AND

IV. Diagnostic Testing:

- **A.** Abnormal test results of the following:
 - 1. Must meet a and b, or c
 - **a.** Positive stress x-rays identifying motion at the ankle or subtalar joint, at least 15^o lateral opening at the ankle joint; **or**
 - b. Demonstrable subtalar movement; and
 - **c.** Negative to minimal arthritic joint changes on x-ray.

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V. Failure to improve with conservative treatment with:

- A. Immobilization with support cast or brace; or
- **B.** Rehabilitation program
- **C.** For either of the above, the time frame will vary dependent on the severity of the injury/trauma.

VI. Special Instructions:

A. None

VII. Level of Care Required:

A. Outpatient or Inpatient depending on patient